

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): Paul J. Carter and Hongxing Zhou  
Serial No.: 10/578,410  
Filed: March 5, 2007  
For: ANTIBODIES THAT BIND INTERLEUKIN-4 RECEPTOR  
Docket No.: 3492-US-PCT  
Group Art Unit No.: 1644  
Examiner: SKELDING, Zachary S.

**PETITION UNDER 37 CFR § 1.182 TO ISSUE A NEW NOTICE OF ALLOWANCE**

**Mail Stop Petition**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Applicants respectfully state that they did not receive the Notice of Allowance and Fee(s) Due that, according to the Office's internal records, was mailed on May 1, 2009, in connection with the above-referenced patent application. Therefore, Applicants hereby petition that a new Notice of Allowance be issued.

Applicants first became aware of the Notice of Allowance when the assistant to the undersigned saw it on the above-referenced patent application's private PAIR website shortly before the final date for paying it without taking an extension of time. Subsequent telephone communication with Examiner Skelding and Deborah E. Dotson, Head Legal Instruments Examiner, Technology Center 1600, confirmed that The Office's internal records indicate that the Notice was timely mailed. However, review of Applicants' mail and docketing files showed that they did not contain a record of the Notice having been received.

Applicants respectfully request that a new Notice of Allowance be issued with a new mailing date and period for responding. As a precaution, in the event that this Petition is denied, it is accompanied by the appropriate issue fee.

Pursuant to 37 CFR § 1.182 and 1.17(f), please charge the petition fee (\$400.00) to Deposit Account No. 09-0089. An original and one copy of this paper are enclosed.

Applicants request favorable action on this petition.

Please send all future correspondence to:  
**22932**

Immunex Corporation  
Law Department  
1201 Amgen Court West  
Seattle, Washington 98119-3105  
(206) 265-7000

Respectfully submitted,

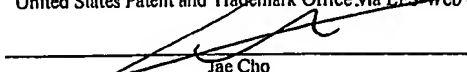


Adjusted date: 11/16/2009 LDIEP1  
08/03/2009 INTFSW, 00005259 090089  
Attorney Agent for Applicant(s)  
Registration No.: 47,763  
Phone: (206) 265-8779  
Date: July 31, 2009

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**CERTIFICATE OF EFS-Web TRANSMISSION**

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being transmitted to the United States Patent and Trademark Office via EFS-Web on the date indicated below:

  
Jae Cho

July 31, 2009  
Date

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND                         |                                   |                              |                          |                           |           |
|---|-----------------------------------|------------------------------|--------------------------|---------------------------|-----------|
| 1 Date of Request: 11/05/09                           |                                   | 2 Serial/Patent # 10/578,410 |                          |                           |           |
| 3 Please refund the following fee(s):                 |                                   | 4 PAPER NUMBER               | 5 DATE FILED             | 6 AMOUNT                  |           |
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|   | Notice of Appeal/Appeal           |                              |                          | \$                        |           |
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| 10 REASON:  |                                   |                              |                          |                           |           |
|   | Overpayment                       |                              |                          |                           |           |
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| X   | No Fee Due (Explanation):         |                              |                          |                           |           |
| PETITION DISMISSED AS MOOT                            |                                   |                              |                          |                           |           |
|   |                                   |                              |                          |                           |           |
|   |                                   |                              |                          |                           |           |
| 11 REFUND REQUESTED BY:                               |                                   |                              |                          |                           |           |
| TYPED/PRINTED NAME:                                   |                                   | April M. Wise                |                          | TITLE: Petitions Examiner |           |
| SIGNATURE:  |                                   | /APRILMWISE/                 |                          | PHONE: 571-272-1642       |           |
| OFFICE:   |                                   | Office of Petitions          |                          |                           |           |
| ***** THIS SPACE RESERVED FOR FINANCE USE ONLY: ***** |                                   |                              |                          |                           |           |
| APPROVED:   |                                   | DATE: 11-13-09               |                          |                           |           |

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**Office of Finance  
Refund Branch  
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